



Our challenges

Tom Lowe, Senior Psychologist



Manipulative

Attention-seeker

mad

Normal

NO JOY

suicide threat



Historical dilemmas

- Definition of self-harm
- Self-harm as a taboo issue
- Professional ignorance and anxieties
- Professionals lack of
 - Shared values
 - Common understandings
 - “joined up working”

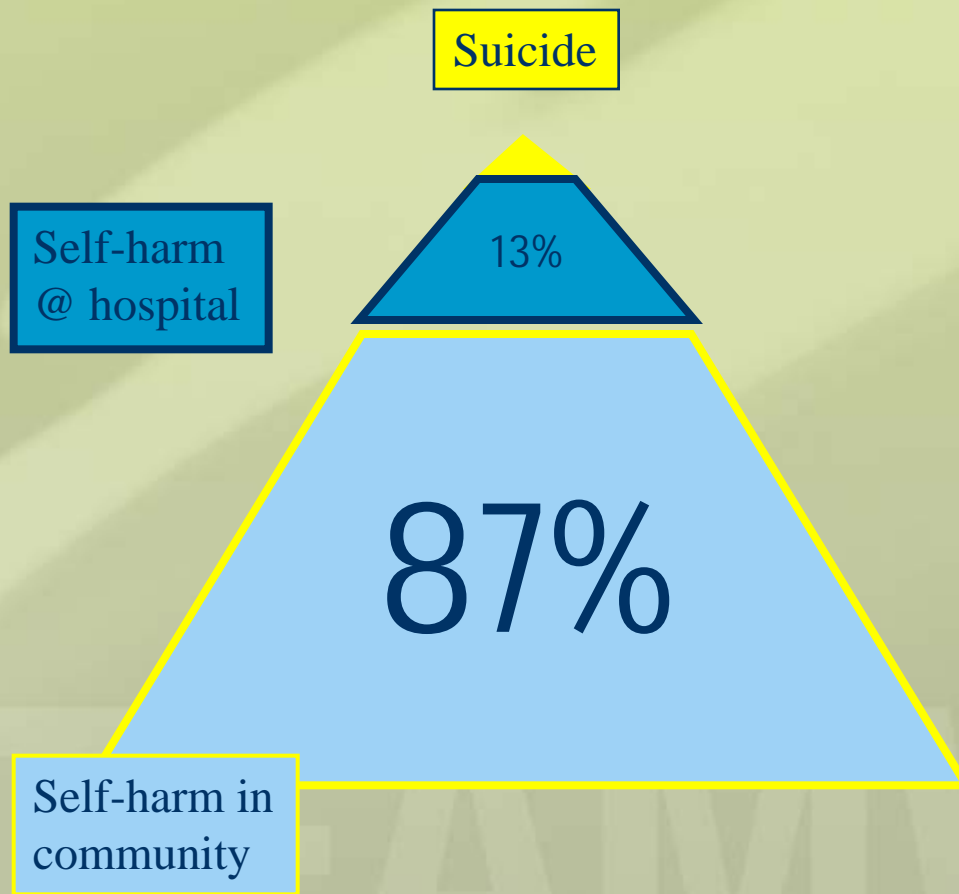


Missed opportunities

- Choose Life, 2002
 - Deliberate self-harm acknowledged as important risk factor for suicide and in its own right but ..
- Truth Hurt, 2006
 - Formidable research and evidence base
 - Clear and robust recommendations but..
- Positive Mental Attitudes Curriculum
 - Claire's Story – very useful and effective resource
 - but...in S4



What have we learned?



- Suicide – 16/100,000
- Self-harm is still a hidden behaviour
- Prevalence is high (Lifetime: 4.6 to 6.6% adult)
- 1 in 10 – 15/16 year old)
- Vulnerable groups



Issues we struggle with

- Why do they do it?
- How many???
- Consent
- Confidentiality
- Sharing information with colleagues
- Who can help and who does what ...



tell an adult you trust

tell

Suicide

shouldn't be a secret

We need to get help for our friends.

My friend told me he wished he was never born and wanted to kill himself.

I didn't know what to do.

I didn't know who to tell.

So, I went to my pupil support teacher.

You have to help your friend get help, even if you break their trust.

If one of your friends is depressed, withdrawn, or talking about ending it,

talk to an adult, teacher,

parent, whatever. You have to tell.

There isn't much choice.

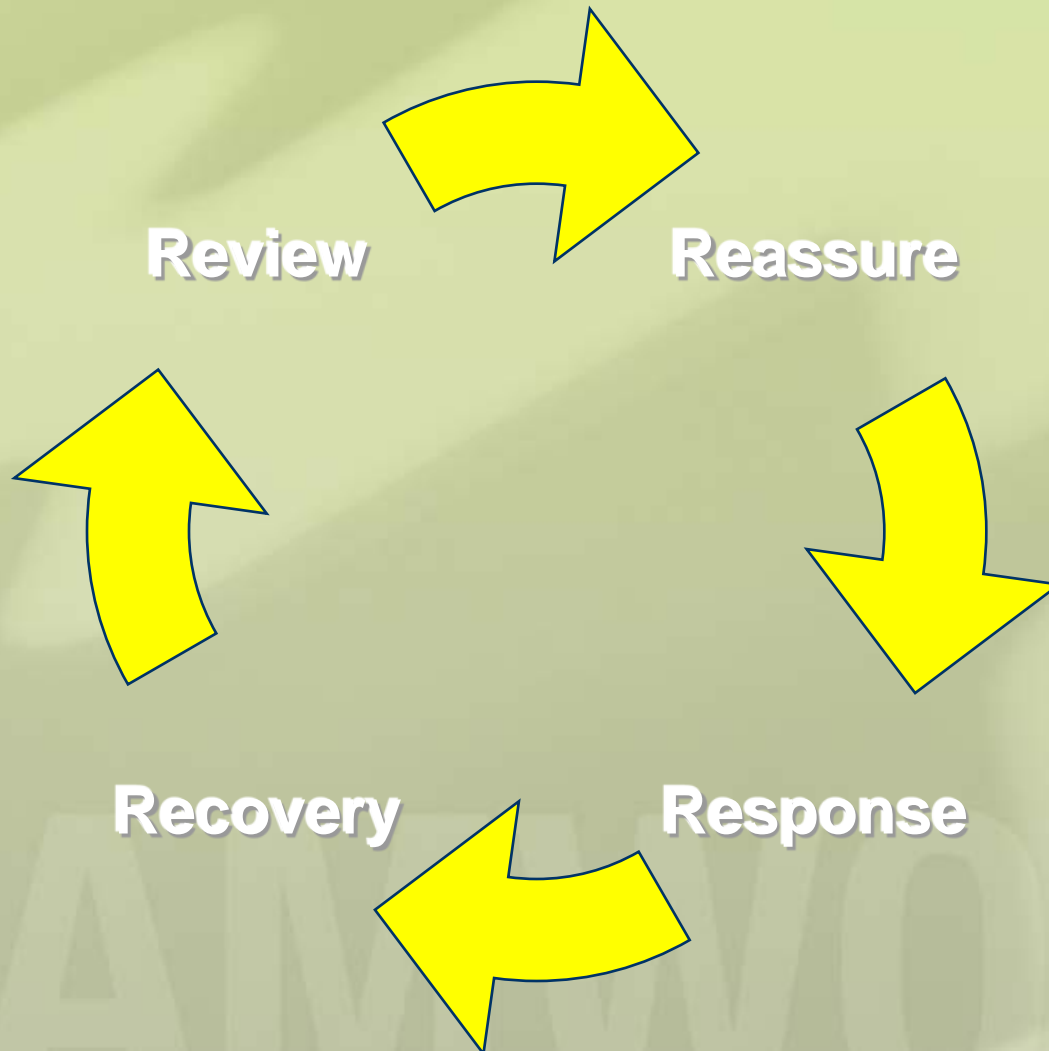
What are you going to do,

let your friend destroy himself?





Support Elements





Shared practice guidelines

- Understanding each other's role
- Who does what ???
- Involving the young person in a support plan

- Practical guidance
- Clarity not myths and vagueness & variability
- Confidence among staff that their input matters

INTERVENTION FLOW CHART

See description of Intervention plans for more detail

CONCERNS IDENTIFIED:

Through discussion with young person, observation of behaviour or reports from others. Senior management informed and coordinator arranged for support worker to support young person.

MEDICAL EMERGENCY

(ANY act of self poisoning or serious self injury)
DO NOT LEAVE ALONE
ACCESS IMMEDIATE MEDICAL INTERVENTION
INFORM PARENTS (page 13 and 15)

*Lanarkshire Treatment Pathways
Suicide & Deliberate Self-Harm*

Explore Nature and Level of Concerns

Support worker will:

- (a) Explore the nature and level of concerns (suicide and deliberate self harm). (b) Support pupil's peers (help from peers – support required by peers). (c) Liaise with coordinator.

* On a continuing basis, discuss concerns, assessments and support plans with other members of the support team or colleagues in their Service. These consultations will be recorded.

Low Level of Concern

Young person is harming themselves to an extent that is unlikely to cause death or serious harm.

Medium Level of Concern

Young person is harming themselves to an extent that could cause accidental death if undetected or untreated.

High Level of Concern

Young person is harming themselves to an extent that could cause immediate accidental death or they intend to complete suicide.

ACTION

Low level of concern

Report findings to Coordinator who will inform SMT
Agreed action made to monitor young person and by whom.
Referral to supporting agency where appropriate.
*Inform parents/ carers with young person's permission
Provide and secure advice on appropriate care of any injury.
Document fully.

Medium level of concern

Report findings to Coordinator who will inform SMT
*Inform parents/ carers
Link with most appropriate agency for further assessment e.g. GP, DCFP, CAMHS, Accident and Emergency.
DO NOT send home alone
Provide and secure advice on appropriate care of any injury
Inform Social Work Department.
Document fully.

High level of concern

Report findings to Coordinator who will inform SMT
DO NOT leave alone
Access emergency medical attention if required
*Inform parents/carers
DO NOT send home alone.
Inform Social Work Department
Involve appropriate external agencies asap.
Document fully

No Immediate Action Required

Follow Up

Review within 1 week of assessment and maintain contact with young person
Maintain contact with parents/carers
Liaise with other agencies involved
Level of concern may change based on this review and the information received

At all times, all staff will ensure that they comply with the current Child Protection Procedures

This flow chart assumes that all users will be trained on ASET and 'Supporting young People who are self-harming'.

**Inform parents/guardians. See discussion on page 7*



- “Develop a **culture** in services and amongst the general public that the most helpful interventions are **not about stopping** self-harm **but tackling the causes behind it.**”

SIREN Conference 2007



Emotional care

- Tension:
 - Keeping them safe <-> Helping them to cope
- Support when needed (27-7-365)
- Need for continuity of support over a long period
- Secondary trauma
 - 'debriefing'
 - Supervision and support



TEAMWORK

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